FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

Kilili for Congress

ADDRESS (number and street) ▼ P.O. Box 502924

☐ Check if different than previously reported. (ACC)

Saipan (CITY ▲) MP (STATE ▲) 96950 – (ZIP CODE ▲)

2. **FEC IDENTIFICATION NUMBER ▼** C C00469882

3. IS THIS REPORT ☐ NEW (N) **OR** ☒ AMENDED (A)

STATE ▼ MP DISTRICT 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☒ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)

☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day **POST**-Election Report for the:

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 07 / 01 / 2021 through 09 / 30 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sablan, Andrea C., , Ms.,

Signature of Treasurer *Sablan, Andrea C., , Ms.,* ***[Electronically Filed]*** Date 01 / 11 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only							

FEC **Form 3** (Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Kilili for Congress

Report Covering the Period: From: 07 / 01 / 2021 To: 09 / 30 / 2021

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	2692.10	12292.10
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	2692.10	12292.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5906.48	11695.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	5906.48	11695.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	86453.56	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 05/2016)

Write or Type Committee Name

Kilili for Congress

Report Covering the Period: From: 07 / 01 / 2021 To: 09 / 30 / 2021

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00	2500.00
(ii) Unitemized	192.10	292.10
(iii) TOTAL of contributions from individuals ▶	192.10	2792.10
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	2500.00	9500.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	2692.10	12292.10
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	12.18
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	2692.10	12304.28

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3** (Revised 05/2016)

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	5906.48	11695.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	5906.48	11695.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	89667.94
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	2692.10
25. SUBTOTAL (add Line 23 and Line 24)	92360.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	5906.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	86453.56

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Kilili for Congress

A.
Full Name (Last, First, Middle Initial): IBEW PAC Voluntary Fund
Mailing Address: 900 Seventh Street, NW
City: Washington, State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C C00027342
Name of Employer:
Occupation:
Receipt For: 2022
☐ Primary ☒ General
☐ Other (specify)
Election Cycle-to-Date: 2500.00
Date of Receipt: 07 / 22 / 2021
Transaction ID : SA11C.7976
Amount of Each Receipt this Period: 2500.00
☐ Memo Item
Donation

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
☐ Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

TOTAL This Period (last page this line number only) ▶ 2500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[x] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Kilili for Congress

A. Full Name (Last, First, Middle Initial): Fraioli & Associates
Mailing Address: PO Box 75214
City: Washington | State: DC | Zip Code: 20013-5214
Purpose of Disbursement: Fundraising Fee
Category/Type: 003
Candidate Name: Kilili for Congress
Office Sought: [x] House [ ] Senate [ ] President
State: MP District: 00
Disbursement For: 2022 [ ] Primary [x] General [ ] Other (specify)
Date of Disbursement: 07/07/2021
FEC Identification Number: C C00469882
Amount of Each Disbursement this Period: 250.00
Transaction ID : SB17.7982
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Happy Market
Mailing Address: PMB 286 PO Box 10005
City: Saipan | State: MP | Zip Code: 96950
Purpose of Disbursement: Campaign Event Expense
Category/Type: 007
Candidate Name: Kilili for Congress
Office Sought: [x] House [ ] Senate [ ] President
State: MP District: 00
Disbursement For: 2022 [ ] Primary [x] General [ ] Other (specify)
Date of Disbursement: 08/11/2021
FEC Identification Number: C C00469882
Amount of Each Disbursement this Period: 115.95
Transaction ID : SB17.7991
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): MARK KELLY FOR SENATE
Mailing Address: PO BOX 27202
City: TUCSON | State: AZ | Zip Code: 85726
Purpose of Disbursement: Donation
Category/Type: 012
Candidate Name: Kilili for Congress
Office Sought: [x] House [ ] Senate [ ] President
State: MP District: 00
Disbursement For: 2022 [ ] Primary [x] General [ ] Other (specify)
Date of Disbursement: 07/27/2021
FEC Identification Number: C C00469882
Amount of Each Disbursement this Period: 1000.00
Transaction ID : SB17.7985
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1365.95

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[x] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Kilili for Congress

A. Full Name (Last, First, Middle Initial)
MARTIN HEINRICH FOR SENATE

Mailing Address P.O. BOX 25763

City: ALBUQUERQUE | State: NM | Zip Code: 87125

Purpose of Disbursement: Donation
Category/Type: 012

Candidate Name: Kilili for Congress

Office Sought: [x] House [ ] Senate [ ] President
State: MP District: 00

Disbursement For: 2022
[ ] Primary [x] General
[ ] Other (specify)

Date of Disbursement: 07 / 27 / 2021

FEC Identification Number: C C00469882

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.7987

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
NMI Democratic Party

Mailing Address P.O. Box 500511

City: Saipan | State: MP | Zip Code: 96950

Purpose of Disbursement: Donation
Category/Type: 012

Candidate Name: Kilili for Congress

Office Sought: [x] House [ ] Senate [ ] President
State: MP District: 00

Disbursement For: 2022
[ ] Primary [x] General
[ ] Other (specify)

Date of Disbursement: 08 / 20 / 2021

FEC Identification Number: C C00469882

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.7979

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Sablan, Gregorio Kilili, Camacho, Rep.,

Mailing Address P.O. Box 502924

City: Saipan | State: MP | Zip Code: 96950

Purpose of Disbursement: Campaign Meeting Expense - Food and Bev
Category/Type: 007

Candidate Name: Kilili for Congress

Office Sought: [x] House [ ] Senate [ ] President
State: MP District: 00

Disbursement For: 2022
[ ] Primary [x] General
[ ] Other (specify)

Date of Disbursement: 07 / 15 / 2021

FEC Identification Number: C C00469882

Amount of Each Disbursement this Period: 134.60

Transaction ID : SB17.7993

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 2134.60

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[x] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Kilili for Congress

A. Full Name (Last, First, Middle Initial)
Sablan, Gregorio Kilili, Camacho, Rep.,

Mailing Address P.O. Box 502924

City: Saipan | State: MP | Zip Code: 96950

Purpose of Disbursement: Donation Reimbursement

Category/Type: 012

Candidate Name: Kilili for Congress

Office Sought: [x] House [ ] Senate [ ] President

State: MP District: 00

Disbursement For: 2022 [ ] Primary [x] General [ ] Other (specify)

Date of Disbursement: 08 / 04 / 2021

FEC Identification Number: C C00469882

Amount of Each Disbursement this Period: 275.00

Transaction ID : SB17.7992

[ ] Memo Item

B. Full Name (Last, First, Middle Initial)
Sablan, Gregorio Kilili, Camacho, Rep.,

Mailing Address P.O. Box 502924

City: Saipan | State: MP | Zip Code: 96950

Purpose of Disbursement: Donation Reimbursement

Category/Type: 012

Candidate Name: Kilili for Congress

Office Sought: [x] House [ ] Senate [ ] President

State: MP District: 00

Disbursement For: 2022 [ ] Primary [x] General [ ] Other (specify)

Date of Disbursement: 09 / 03 / 2021

FEC Identification Number: C C00469882

Amount of Each Disbursement this Period: 575.00

Transaction ID : SB17.7990

[ ] Memo Item

C. Full Name (Last, First, Middle Initial)
Sablan, Gregorio Kilili, Camacho, Rep.,

Mailing Address P.O. Box 502924

City: Saipan | State: MP | Zip Code: 96950

Purpose of Disbursement: Donation Reimbursement / F& B

Category/Type: 012

Candidate Name: Kilili for Congress

Office Sought: [x] House [ ] Senate [ ] President

State: MP District: 00

Disbursement For: 2022 [ ] Primary [x] General [ ] Other (specify)

Date of Disbursement: 09 / 30 / 2021

FEC Identification Number: C C00469882

Amount of Each Disbursement this Period: 455.93

Transaction ID : SB17.7989

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1305.93

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
[x] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Kilili for Congress

A.
Full Name (Last, First, Middle Initial)
TONY CARDENAS FOR CONGRESS

Mailing Address PO BOX 15320

City: WASHINGTON
State: DC
Zip Code: 20003

Purpose of Disbursement: Donation
Category/Type: 012

Candidate Name: Kilili for Congress

Office Sought: [x] House [ ] Senate [ ] President
State: MP District: 00

Disbursement For: 2022
[ ] Primary [x] General
[ ] Other (specify)

Date of Disbursement: 08 / 01 / 2021

FEC Identification Number: C C00469882

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.7983

[ ] Memo Item

B.
Full Name (Last, First, Middle Initial)

Mailing Address

City
State
Zip Code

Purpose of Disbursement
Category/Type

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For:
[ ] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

[ ] Memo Item

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City
State
Zip Code

Purpose of Disbursement
Category/Type

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For:
[ ] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 5806.48